

Application for Taxicab Driver Permit

Date Rec'd _____

New _____ Renewal _____

A non-refundable filing fee of **\$150** will be charged for each taxi driver applicant, payable to the **City of Pleasanton** in the form of cash, cashier's check, money order or personal check. Fingerprints of the applicant must be forwarded to the Department of Justice for processing. A charge of **\$57** for this service is required in the form of **cash, cashier's check or money order** payable to the **City of Pleasanton** at the time of this service.

No permits will be issued until a background check and fingerprint processing has been completed and results have been received from the Department of Justice. No one shall work until the permit is issued and is in the possession of the applicant.

Applicant Name _____ Sex _____

(Last, First Middle)

Nicknames (or other names you go by) _____

Home Address _____ City _____ Zip _____

Phone (Home) _____ (Cell) _____

Date of Birth _____ Place of Birth _____

Height _____ Weight _____ Hair color _____ Eye color _____

CA Driver's License # _____ Exp Date _____ Social Security # _____

Has your driver's license ever been revoked or suspended? Yes No

If yes, please explain why _____

Taxicab Company Name _____

Taxicab Company Address _____

Taxicab Company Phone _____

Are you self-employed or an employee? _____

Have you ever been convicted of a Felony? Yes _____ No _____ Describe (include where)

Do you have a physical impairment that would affect your ability to work as a taxi driver?

Yes _____ No _____ If yes, describe:

List prior experience in transportation of passengers: _____

List your two (2) most recent home addresses and the dates of residence.

Address _____ # years at address _____ City _____ State _____ Zip _____
Address _____ # years at address _____ City _____ State _____ Zip _____

List each business in which you have been employed within the past ten (10) years.

Business Name _____ Phone Number _____ Address _____ City _____ Zip _____ Employed from ___/___/___ to ___/___/___ Position held _____ Contact Person _____
Business Name _____ Phone Number _____ Address _____ City _____ Zip _____ Employed from ___/___/___ to ___/___/___ Position held _____ Contact Person _____
Business Name _____ Phone Number _____ Address _____ City _____ Zip _____ Employed from ___/___/___ to ___/___/___ Position held _____ Contact Person _____

Business Name _____	Phone Number _____
Address _____	City _____ Zip _____
Employed from ___ / ___ to ___ / ___	Position held _____
Contact Person _____	

In the past ten (10) years, have you been convicted or entered a plea of no contest to any offense other than a traffic violation, in a court? (circle) Yes No
If yes, describe below:

Offense: _____	Date of Offense: _____
Arresting Agency: _____	Court: _____
Plea: _____	Has the record been expunged? Yes No

Offense: _____	Date of Offense: _____
Arresting Agency: _____	Court: _____
Plea: _____	Has the record been expunged? Yes No

Offense: _____	Date of Offense: _____
Arresting Agency: _____	Court: _____
Plea: _____	Has the record been expunged? Yes No

Do you have any criminal charges pending against you, other than a traffic violation? (circle) Yes No
If yes, describe below:

Offense: _____	Date of Offense: _____
Arresting Agency: _____	Court: _____
Court Address: _____	
Case Number: _____	Court Date: _____

Offense: _____	Date of Offense: _____
Arresting Agency: _____	Court: _____
Court Address: _____	
Case Number: _____	Court Date: _____

Offense: _____	Date of Offense: _____
Arresting Agency: _____	Court: _____
Court Address: _____	
Case Number: _____	Court Date: _____

I hereby declare, under penalty of perjury, that the foregoing is true and correct.

Signature _____ Date _____